

Docket No.: 012A.0063.U1(US)

**DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FLEXIBLE ENDOSCOPE

the specification of which:

(check one) ☐ is attached hereto.

☐ was filed on _____ as U.S. Application Serial No. _____ and was amended on _____ (if applicable).

☒ was described and claimed in PCT International Application Number PCT/US03/09155 filed on 25 March 2003 and

☒ as amended under PCT Article 19 on 29 September 2003 (if any) and/or

☐ as amended under PCT Article 34 as published in the Annex(es) to the International Preliminary Examination Report (if any).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, §1.56

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate(s) listed below and have also identified below any foreign application(s) for patent or inventor's certificate(s) having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

(Number)

(Country)

(Day/Mon/Year Filed)

☐ Yes ☐ No

I hereby claim the benefit under Title 35, United States Code, §119(e) of the United States provisional patent application(s) listed below:

(Application Serial No.)

(Filing Date)

I hereby claim benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code,

§112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)

(Filing Date)

(Status)

POWER OF ATTORNEY: As a named inventor I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith:

Mark F. Harrington 31,686
Harry F. Smith 32,493

And all attorneys associated with Customer No.: 29,683

SEND CORRESPONDENCE TO:

Customer No.: 29,683

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF INVENTOR : LAST NAME FIRST NAME MIDDLE NAME
DiRusso Carlo A.

RESIDENCE & CITY & STATE OR COUNTRY CITIZENSHIP
CITIZENSHIP: Bronx, New York NY United States

POST OFFICE ADDRESS: 2533 Young Avenue
Bronx, New York 10469

Signature

Date

FULL NAME OF INVENTOR : LAST NAME FIRST NAME MIDDLE NAME
Graboye Edward A.

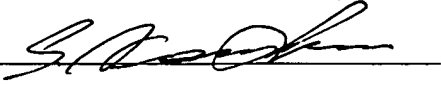
RESIDENCE & CITY & STATE OR COUNTRY CITIZENSHIP
CITIZENSHIP: Danbury, Connecticut CT United States

POST OFFICE ADDRESS: 2 Jireh Lane
Brookfield, Connecticut 06804

Signature

Date

300

FULL NAME OF INVENTOR :	LAST NAME <u>Konstorum</u>	FIRST NAME <u>Gregory</u>	MIDDLE NAME <u>S.</u>
RESIDENCE & CITIZENSHIP:	CITY & STATE OR COUNTRY <u>Stamford, Connecticut CT</u>	CITIZENSHIP United States	
POST OFFICE ADDRESS: 66-B Seaside Avenue Stamford, Connecticut 06902			
Signature <u></u>		Date <u>10.29.09</u>	